

Effective October 1, 2000

Application or Docket Number

09729910

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS							RA	TE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASI	C FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			23 minus 20=		•	13	X\$	9=	112	OR	X\$18=	234	
INDEPENDENT CLAIMS			4 minus 3 =		*	1	X4	0=	40	OR	X80=	(80	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				+13	35=		OR	+270=	1	
* If the difference in column 1 is less t				s than zero, enter "0" in column 2			TO	TAL	512	OR	TOTAL	1027	
	С	LAIMS AS A	MENDED - PART II							•	OTHER	THAN	
(Column 1)				(Colum		(Column 3) SMAL		ALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	* ENTATION OF M	Minus	***	T CL AINA	=	X4	0=		OR	X80=		
	FIRST PRESE	INTATION OF M	ULTIPLE DEI	, LEINDEIN	CLAIM		+13	35=		OR	+270=		
								OTAL			TOTAL		
		(Column 1)		(Calu	mn 2)	(Column 2)	ADDIT	. FEE			ADDIT. FEE		
		CLAIMS		HIGH	HEST	(Column 3)			ADDI-	1		ADDI	
AMENDMENT B		REMAINING AFTER AMENDMENT	. 14	PREVI	MBER OUSLY FOR	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	X\$	9=		OR	X\$18=		
	Independent	pendent		, <u> </u>	=	X4	0=		OR	X80=			
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN [*]	T CLAIM		+13	5-			+270=		
								OTAL		OR	TOTAL		
							ADDIT			OR	ADDIT. FEE		
_	r	(Column 1)			mn 2)	(Column 3)							
AMENDMENT C	·	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	-	
	Independent	*	Minus	***		=	X4	0=		OR	X80=		
L	FIRST PRESE	- · · ·	ULTIPLE DE	LE DEPENDENT CI				$-\dagger$		·			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3								5=		OR	+270=		
••	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												